



For Ecology Use Fee Paid

Section 1. APPLICANT - PERSON, ORGANIZATION, OR WATER SYSTEM

Name 8	rian J.	Libby	S. B	aaRSTA	Home Tel	:(425) 481	- 6971
Mailing Ad City W 80	DINVILL	5 24 - E St	ate Wa Zi	p+4 9807	, K. Work Tel: 2 + FA	X:()	
□ Same	e as abov	e .			L ABOUT TH		
Name to	halb dress P.G.	Lete Box =	bure		Home Tel	:(509) 68	7 9390 more as above
City C	0 0 0	St	atel Va 7	n+4 0891	G + FA	X·( ) <6	more as
Relationship	to applican	t Contr	uct to	lder	on prop.	arty	abare
	3. STAT					J	
purpose(s)	of Domes	t12 9 -	toraga	Tion	⊇ ground water s	. AT	TACH A "LEGAL"
not sufficien	ıt.				ions.) NOTE: A ta		er or a plat number is
	ded:	-					e that the water will be
	From _		to	_//_	CATINGOUS		
Section	4. WAT	ER SOU	RCE				
If SURFA	ACE WATE	ER			If GROUNDWA	TER	
lake, etc.	water source If unnamed, stream," etc	write "unn	amed spring	, "	A permit is desired	d for	well(s).
Number o	f diversions:						
Source flows into (name of body of water):					Size & depth of well(s):		
LOCATION	ON						
	north-south				om the point of o		ithdrawal to the chelen Lend 6.5
¼ of	¹⁄4 of	Section	Township	Range(E/W)		If location of	f source is platted, complete below:  ock Subdivision
XW	NW	5	27	22	Cholen.	15 LAN	Land Tracts.
				* **	(	rragated	Land Tracts.
For Ecology	Use Date Re	eceived: FEBI	RUARY 27	1998 Prior	ity Date: <u>  FEBA</u> 4Ar		
SEPA: Exem	pt/Not Exempt	FERC L	icense #		Dept. Of He	alth #	
Date Accept	ed As Complete	•	В	yD	ate Returned	Ву	WRIA:

ECY 040-1-14 Rev. 9/95 F

**APPLICATION** 

Appl. No.: 54-32651

Sec	ction 5. GENERAL WATER SYSTEM INFORMATION
A.	Name of system, if named: Wine
В.	Briefly describe your proposed water system. (See instructions.)  1 Hp Shallow well pump. Single Family  Residence _ pump 15 in pump Hoose _
C.	Do you already have any water rights or claims associated with this property or system? YES DO NO PROVIDE DOCUMENTATION.
	ction 6. DOMESTIC / PUBLIC WATER SUPPLY SYSTEM INFORMATION ompleted for all domestic/public supply uses.)
A.	Number of "connections" requested: 1 Type of connection How (Homes, Apartment, Recreational, etc.)
B.	Are you within the area of an approved water system? (Homes, Apartment, Recreational, etc.)  If yes, explain why you are unable to connect to the system. Note: Regional water systems are identified by your County Health Department.
Con	nplete C. and D. only if the proposed water system will have fifteen or more connections.
C.	Do you have a current water system plan approved by the Washington State Department of Health?  If yes, when was it approved?    YES   NO
D.	Do you have an approved conservation plan?  If yes, when was it approved? Please attach the current approved version of your plan.
	ction 7. IRRIGATION/AGRICULTURAL/FARM INFORMATION omplete for all irrigation and agriculture uses.)
A.	Total number of acres to be irrigated: 1/10 of An Ac. Law N
B.	List total number of acres for other specified agricultural uses:
	Use Acres Use Acres Use Acres
C.	Total number of acres to be covered by this application: $\frac{1}{5}$
D.	Family Farm Act (Initiative Measure Number 59, November 3, 1977)  Add up the acreage in which you have a controlling interest, including only:  ‡ Acreage irrigated under water rights acquired after December 8, 1977;  ‡ Acreage proposed to be irrigated under this application;  ‡ Acreage proposed to be irrigated under other pending application(s).
	<ol> <li>Is the combined acreage greater than 2000 acres?</li> <li>Do you have a controlling interest in a Family Farm Development Permit?</li> <li>□ YES □ NO</li> <li>If yes, enter permit no:</li> </ol>
E.	Farm uses: Stockwater - Total # of animals Animal type (If dairy cattle, see below) Dairy - # Milking # Non-milking

## Section 8. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water?

□ YES ★NO

NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point, and some portion of the storage will be above grade, you must also apply for a reservoir permit. You can get a reservoir permit application from the Department of Ecology.

## Section 9. DRIVING DIRECTIONS

Provide detailed driving instructions to the project site.

Go Worth on The Chelan - Manson Hiway (SR150)

5,2 miles. Approx 1/4 mi past Rocky Point. House is

not visible From Road. Please contact Ron LeFabure
at 509-687 9390-To oben gate - next Door neighbor.

Section 10. REQUIRED MAP

A. Attach a map of the project. (See instructions.)

## Section 11. PROPERTY OWNERSHIP

A. Does the applicant own the land on which the water will be used?

If no, explain the applicant's interest in the place of use and provide the name(s) and address(es) of the owner(s):

Buying on Contract

B. Does the applicant own the land on which the water source is located? If no, submit a copy of agreement:

XYES - NO

I certify that the information above is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though I may have been assisted in the preparation of the above application by the employees of the Department of Ecology, all responsibility for the accuracy of the information rests with me.

Applicant (or authorized representative)

2/26/1998

Sauce

Landowner for place of use (if same as applicant, write "same")

Date

Attacher	e Wa	ter b	lig li	Ts clai	in sub	mitteel 6	19-19-
WATER	hase	been	Tu	use	Bince	Approx.	1968-

Use this page to continue your answers to any questions on the application. Please indicate section

number before answer.

Examination fee was not enclosed		APPLICANT PLEASE RETURN TO CASHIER, PO BOX 5128, LACEY, WA 98509-5128
Section number(s)incomplete	is/are	APPLICANT PLEASE RETURN TO THE APPROPRIATE REGIONAL OFFICE
Explanation:		
Please provide the additional information requested (da	more for Branch suppression consistent manager vestigate.	application by

Ecology staff	Date
Leology starr	Date

To receive this document in alternative format, contact Lisa Newman at (360) 407-6604 (Voice) or (360) 407-6006 (TDD).